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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents and/or fees referred to as attached therein are being deposited with the United States Postal Service on Local 2004, 2004 in an envelope as First Class Mail, addressed to Mail/Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria,

VA 22313-1450.

Pat Tate

Attorney Docket No.: INT1P928C1

First Named Inventor: STRUB, et al

Application Number: 09/557,081

Filing Date: April 21, 2000

Group Art Unit: 2615

Examiner: THAI Q. TRAN

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

RECEIVED

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114	
a. Previously submitted:	
	Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on
	Consider the arguments in the Appeal Brief or Reply Brief previously filed on
	Other
b. Enclosed:	
	Amendment/Reply
	Affidavit(s)/Declaration(s)
	Information Disclosure Statement (IDS)
	Other
05/05/2004 AWONDAF1 00000007	09557081
01 FC:1801	770.00 DP

Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below. Claims Highest **Remaining SMALL ENTITY** LARGE ENTITY Previously Present RATE FEE OR RATE FEE Amendment Paid For Extra TOTAL X18 =\$ CLAIMS 50 -53 0 X9 =\$ OR **INDEP** 0 OR X84 =\$ CLAIMS 5 -5 X42 =\$ \$280 [] Multiple Dependent Claim Present \$140 and Fee Not Previously Paid \$ 0 **TOTAL** 2. Miscellaneous: Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months. b. | | Applicant hereby petitions for a two month extension of time. 3. Applicant(s) hereby petition that any additional required extension of time be granted. 4. Enclosed is our Check No. 1267 in the amount of \$1190.00 to cover the RCE Fee required under 37 5. CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees. Please charge Deposit Account No. 50-0685 () in the amount of \$_____ to cover the 6. additional claim fee and/or extension of time fees. If the required fees are missing or any additional fees are required during the pendency of the subject 7. application, please change such fees or credit any overpayment to Deposit Account No. 50-0685 (INT1P928C1). Please continue to send correspondence to the following address: 8. **CUSTOMER NO. 21912** VAN PELT & YI LLP 10050 N. Foothill Blvd., Ste. 200 Cupertino, CA 95014 Tel (408) 973-2585 Fax (408) 973-2585 Date: 4/29/2004 Diana Y. Fu Reg. No. 52,924